	AVAIL	ABLE	70						_	
DEST AVAILABLE COPY					Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECOF Effective December 29, 1999					09	6	511.3	342		
CLAIMS AS FILED - PART I									1	
(Calumn 1) (Calumn 2)					LENTITY	OR		R THAN ENTITY		
FOR NUMBER FILED NUMBER EXTRA			RATE	FEE]	RATE	FEE	1.		
BASIC FEE				345.00	OR	多	690.00]		
TOTAL CLAIMS	MS 2 minus 20=			X\$ 9=		OR	X\$18=	18] .	
INDEPENDENT CLAIMS 5 minus 3 = 1				X39=		OR	X78=	156		
MULTIPLE DEPENDENT CLAIM PRESENT				+130=		OR	+260=		1	
* If the difference in column 1 is less than zero, enter *0" in column 2						OR	TOTAL	864	1	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)					LENTITY	00	OTHER			
SALTINIA CLAIM	IS Comment	(Column 2) HEGHEST	(Column 3)	SMAL		OR 1	SMALL	<u> </u>	-	
REMAIN AFTE AMENDI	A The second	NUMBER PREVIOUSLY PAID FOR	PRESENT- EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	<u> </u>	
Total	√ Minus	- 8	- /	X\$ 9=		OR	X\$18=	- '	1	
Independent •	Minus	- 5	=/	X39=		OR	X78=		1	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				+130=		OR	+260=			
		•		TOTA			TOTAL		1	
4-12-04 (Colum	n 11	(Column 2)	(Column 0)	ADDIT. FE	E		ADDIT. FEE		İ	
CLAIN	S	HIGHEST.	(Column 3)		ADDI-	1		4001	Į	
REMAIN AFTE AMENDA	A PARTY	NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	TIONAL		RATE	ADDI- TIONAL		
Total · /9 Independent · ((Minus	-21	. /	X\$ 9=	FEE	OR	X\$18=	FEE		
independent • () Minus	- 5	-/	X39=	†	OR	XX=	% <u>®</u>		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				+130=		OR	+260=	υψ		
				TOTA				860	d	
(Colum	n 1)	(Column 2)	(Column 3)	ADDIT. FEI	<u> </u>		TOTAL ADDIT. FEE	- DW	12	
CLAIM	S	HIGHEST			ADDI-	1		400	i	
REMAIN AFTER AMENDA Total - //	A	PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	TIONAL		RATE	ADDI- TIONAL		
Total · /?	Minus	- 21	. —	X\$ 9=	FEE	OR	X\$18=	FEE		
Independent • 6	Minus	••• 6	•	X39=			X78=			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					1	OR	77, 0-		l	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.				+130=		OR	+260=			
"If the "Highest Number Previously Peid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Peid For" IN THIS SPACE is less than 2, enter "3."						OR	TOTAL ADDIT, FEE		1	
The Highest Number Previous	usty Paid For IN THI sty Paid For (Total o	S SPACE is less that r Independent) is the	in 3, enter "3." highest number	ADDIT. FEE		-				
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